## \* PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number **10**/589202

| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  + \$ 180 =  | 1018        |  |                              |                              |                              |                        |                 |                       |              |    |            |        |
|---|-------------|--|------------------------------|------------------------------|------------------------------|------------------------|-----------------|-----------------------|--------------|----|------------|--------|
| S. NATIONAL STAGE FEES   SIMULENT. = 3 150   LARGE ENT. = 5 300   |             |  | CLAIMS A                     |                              | 11TY                         | OR                     |                 |                       |              |    |            |        |
| ASIC FEE SMALL ENT. = \$ 150  | U.\$.       | NATIONAL S                                     | STAGE FEES                   | (Colum                       | 111 JJ                       | ,,                     | Column 2)       | RATE                  | FEE          | l  | RATE       | FEE.   |
| Add other albustions   Satisfies PCT Article 3x(1)   All other albustions   S 100   \$ 200   \$ 507   \$ 100   \$ 200   \$ \$ 507   \$ 100   \$ 200   \$ \$ 507   \$ 100   \$ 200   \$ \$ 507   \$ 100   \$ 200   \$ \$ 507   \$ 100   \$ 200   \$ \$ 507   \$ 100   \$ 200   \$ \$ 507   \$ 100   \$ 200   \$ \$ 507   \$ 100   \$ 200   \$ \$ 507   \$ 100   \$ 200   \$ \$ 507   \$ 100   \$ 507 | BAS         | IC FEE   |                              | SMALL ENT. = \$ 150 L        |                              | LARG                   | E ENT. = \$ 300 |                       |              | OR |            | \$300  |
| EARCH FEE   U.S. is ISA = 3 80 / 3 100  | EXA         | MINATION FE                                    | E                            |                              |                              |                        |                 | EXAM. FEE             |              |    | EXAM. FEE  | 242    |
| OTAL CHARGEABLE CLAIMS    minus 20 =  | SEA         | RCH FEE  | -                            | U.S. is ISA = . ALL other oc | \$ 50 / \$ 100<br>ountries = | ALL other situations = |                 | SEARCH FEE            |              |    | SEARCH FEE | 400    |
| NDEPENDENT CLAIMS minus 3 = .    IULTIPLE DEPENDENT CLAIM PRESENT   | FEE         | FOR EXTRA S                                    | PEC. PGS.                    | mir                          | าบร 100 =                    | / 50 =                 |                 | X \$ 125 =            |              | •  | X \$ 250 = | /      |
| ILLTIPLE DEPENDENT CLAIM PRESENT  If the difference in column 1 is less than zero, enter "0" in column 2  CLAIMS AS AMENDED - PART II  CCOlumn 1)  CCOlumn 2)  CCOlumn 3)  HIGHEST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  Total  CCOlumn 1)  CCOlumn 2)  (Column 3)  HIGHEST NUMBER PRESENT PRESENT PRESENT PRESENT PRESENT PREVIOUSLY PREVIOUSLY PREVIOUSLY PREVIOUSLY PREVIOUSLY PREVIOUSLY PRESENT PREVIOUSLY PRESENT PRESENTATION OF MULTIPLE DEPENDENT CLAIM  Total  CCOlumn 1)  CCOlumn 2)  (Column 3)  HIGHEST NUMBER PRESENT PRESENT PRESENT PREVIOUSLY PRESENT PREVIOUSLY PREVIOUSLY PRESENT PREVIOUSLY PRESENT PREVIOUSLY PRESENT PREVIOUSLY PRESENT PREVIOUSLY PRESENT PRESENTATION OF MULTIPLE DEPENDENT CLAIM  Total  CCOlumn 1)  CCOlumn 2)  (Column 3)  HIGHEST NUMBER PRESENT AMENDMENT PREVIOUSLY PRESENT PREVIOUSLY PREVIOUSLY PREVIOUSLY PREVIOUSLY PREVIOUSLY PRESENT PRESENT FEED OR X \$ 50 =  | TOT         | AL CHARGEA                                     | BLE CLAIMS                   | 7 minus 20 = .               |                              |                        | 7               | X \$ 25 =             |              | OR | X \$ 50 =  | 1      |
| If the difference in column 1 is less than zero, enter *0" in column 2  CLAIM'S AS AMENDED - PART II  CLAMS REMAINING REMAINING AMENDMENT FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  Total  CLOUMN 2)  (Column 2)  (Column 3)  HIGHEST PRESENT FEE  Total  CLOUMN 3  HIGHEST PRESENT FEE  COR  COR  COR  COR  COLUMN 3  HIGHEST PRESENT FEE  COR  COR  COR  COR  COR  COR  COR  C  | INDE        | PENDENT CL                                     | AIMS.                        | minus 3 = .                  |                              |                        | 1               | X \$ 100 =            |              | OR | X \$ 200 = | /      |
| CLAIMS AS AMENDED - PART II  CCOlumn 1) (Column 2) (Column 3)  REMANING REMANING NUMBER PRESENT PREVIOUSLY PAID FOR  Total * 7 Minus *** 3 =  | MUL         | TIPLE DEPEN                                    | DENT CLAIM PR                | ESENT                        |                              |                        |                 | + \$ 180 =            | -            | OR | + \$ 360 = | /      |
| Column 1) (Column 2) (Column 3)  REMAINING REMAINING AFTER AMENDMENT PAID FOR TOTAL ADDIT.  COLAIMS REMAINING AFTER PREVIOUSLY PAID FOR TOTAL ADDIT.  COLAIMS REMAINING AFTER PREVIOUSLY PAID FOR TOTAL ADDIT.  COLAIMS REMAINING PREVIOUSLY PAID FOR TOTAL ADDIT.  COLAIMS REMAINING AFTER AMENDMENT PREVIOUSLY PAID FOR TOTAL ADDIT.  COLAIMS REMAINING PREVIOUSLY PAID FOR TOTAL ADDIT.  COLAIMS REMAINING AFTER AMENDMENT PREVIOUSLY PAID FOR TOTAL ADDIT.  Total Minus ** =  | • If        | the difference                                 | in column 1 is               | lumn 2                       | TOTAL                        |                        | OR              | TOTAL                 | UN           |    |            |        |
| REMAINING AFTER AMENDMENT PREVIOUSLY PAID FOR PRESENT FEE TOTAL ADDITIONAL FEE TOTAL ADDIT.    COlumn 1)  |             |  | (Column 3)                   | SMALL ENTITY                 |                              | OR                     |                 |                       |              |    |            |        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  (Column 1)  (Column 2)  (Column 3)  (RATE  | AMENDMENT A |  | CLAIMS<br>REMAINING<br>AFTER |                              | PREVI                        | BER<br>OUSLY           |                 | RATE                  | TIONAL       |    | RATE       | TIONAL |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM    + \$ 180 =  |             | Total  | •7                           | Minus                        | * 2                          | 20                     | = /             | X \$ 25 =             | . 1          | OR | X \$ 50 =  | ,      |
| (Column 1) (Column 2) (Column 3)    CLAIMS   HIGHEST   NUMBER   PRESENT   EXTRA     FEE   |             | Iridependent                                   | *./                          | Minus                        | ··· 3                        | 3                      | - /             | X \$ 100 =            | -            | OR | X \$ 200 = | 7      |
| (Column 1) (Column 2) (Column 3)    CLAIMS   HIGHEST   PRESENT     AMENDMENT   PREVIOUSLY   PAID FOR     Total   Minus  |             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                              |                              |                              |                        |                 | + \$ 180 =            |              | OR | + \$ 360 = | 7      |
| Total * Minus *** =   |             | ·  |                              |                              |                              | •                      | ·               |                       | (            | OR |            |        |
| REMAINING AFTER AMENDMENT PREVIOUSLY PAID FOR TOTAL ADDITIONAL FEE  Total   |             |  |                              |                              |                              |                        | (Column 3)      |                       |              |    |            |        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  + \$ 180 = OR + \$ 360 = OR TOTAL ADDIT. FEE  * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".  | 8 7         |  | REMAINING<br>AFTER           | ·                            | NUM<br>PREVI                 | BER<br>OUSLY           |                 | RATE                  | TIONAL       |    | RATE       | TIONAL |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  + \$ 180 = TOTAL ADDIT. FEE  TOTAL ADDIT. FEE  TOTAL ADDIT. FEE  OR + \$ 380 = TOTAL ADDIT. FEE  TOTAL ADDIT. FEE  * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".  | DME         | Total  | •                            | Minus -                      | **                           |                        | a               | X \$ 25 =             |              | OR | X \$ 50 =  |        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  + \$ 180 = TOTAL ADDIT. FEE  TOTAL ADDIT. FEE  TOTAL ADDIT. FEE  OR + \$ 380 = TOTAL ADDIT. FEE  TOTAL ADDIT. FEE  * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".  | AMEN        | Independent                                    | •                            | Minus                        | ***                          |                        |                 | X \$ 100 =            |              | OR | X \$ 200 = |        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".  |             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                              |                              |                              |                        |                 | + \$ 180 =            |              | OR | + \$ 360 = |        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".  |             |  |                              |                              |                              |                        |                 |                       |              | OR |            |        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".  |             |  |                              |                              |                              |                        | •               | •                     |              |    |            |        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".  |             |  |                              |                              |                              | 74.0                   |                 |                       | •            |    |            |        |
| *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".  | **          | If the "Highest N                              | umber Previously Pa          | ild For IN THIS              | SPACE is les                 | s than 2               | 0', enter "20". | W                     |              |    |            |        |
|   | ***         |  |                              |                              |                              |                        |                 | - the annual state ha | . la aduan 4 |    |            |        |